

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		59	1220
FORMALITY REVIEW	LCK	1034	3-22-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 -+ ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	✓
2	
3	
4	✓
5	0
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15	0
16	✓
17	0
18	✓
19	✓
20	0
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23	0
24	✓
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26	✓
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29	✓
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39	✓
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43	✓
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Claim	Date
Final Original	
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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